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ABSTRACT

Intended for special education program planning teams, the guide details the development and implementation of full services programs for handicapped children in Prince William County, Maryland as specified in the Public Law 94-142. It is explained that the Full Services Model Program Consists of four processes: identification (involving public awareness and screening activities); assessment (including the diagnostic evaluation and a multidisciplinary staffing); placement (involving determination of service needs, development of an individual educational plan, and comparison of placement alternatives); and the instructional process (implementing the individual instructional plan and reporting individual progress). Provided are statements of responsibility in the delivery of special education services of the following agencies or persons: the State Department of Education, the Division of Special Education, the local education agencies, the school principal, the teachers of handicapped children, the local supervisor of special education, and appraisal and support personnel. Also provided are planning forms for assessing current programs and developing new program elements. (PT)

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THE PRINCE WILLIAM MODEL

A Planning Guide for the Development and Implementation of Full Services for All Handicapped Children

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Foreword

Special Education in Prince William County took a great step forward in the past year with the development of the Planning Model as described herein. The initial leadership effort with the plan evolved as a joint venture of our local school system and the Division of Special Education, in the State Department of Education in Richmond. The Division of Special Education assisted both in funding and encouragement as well as advice at critical stages of the development of the Model.

I commend the National Association of State Directors of Special Education (NASDSE) for their assistance and guidance in our planning process leading to this Model; and a special word of thanks should be given to NASDSE's Executive Director, Dr. Richard Galloway, for the numerous hours he spent with both local and State staff members in seeing this effort through to completion.

It has been said the schools are the reflection of the public and as such are unable to accept change readily. However, in my professional life, I have found that lay boards and parents are far more willing to take greater risks and to accept change than the professional staff. The development of this Model proved to be no exception. Both the parents and the members of the Prince William County School Board are to be congratulated for their leadership and willingness to explore new territory.

It is our sincere desire that this Model will be beneficial to other local educational agencies throughout Virginia and the country as they move forward in their efforts to develop full services for all handicapped children within their charge.

MILTON L. SNYDER
Division Superintendent,
Prince William County Public Schools, Virginia

Acknowledgements

This Special Education Program Model is a product of a participatory planning process conducted in the public schools of Prince William County, Virginia, following a recommendation by the County School Board. The planning activities involved more than 50 persons, including the Division Superintendent and his executive management team, principals, supervisors of special and general education, special class and regular teachers, support service personnel, and parents. Their names are listed at the end of this publication.

The planning activities leading to development of the program model were made possible by a grant to the County from the Division of Special Education, Virginia State Department of Education. Technical assistance in the design and implementation of the planning activities was provided by the National Association of State Directors of Special Education, Inc., through a contract with the County School Division.

The leadership of Dr. Milton L. Snyder, Superintendent of School Services, and the members of the Prince William County School Board in initiating the activities leading to the development and adoption of this program is recognized as the type of forceful, forward-looking direction which executive managers of school systems across the country must take in creating appropriate educational programs for all handicapped children.

Special recognition must be given to Dr. William Helton, Associate Superintendent of School Services, for his leadership role in developing the funding proposal as well as in coordinating all planning activities and the technical assistance provided by NASDSE personnel.

Finally, the program model would not have been developed without the thousands of hours contributed by supervisors, principals, teachers, and parents in the Prince William County school system. Their time was given from busy schedules in the belief that their efforts would be compensated through the provision of better services to handicapped children. Further reward to all who participated in the development of this program will come as other local education agencies use this program model in reviewing their own existing programs and planning new or more responsive services and programs for handicapped children across the nation.

JAMES R. GALLOWAY, Executive Director
WILLIAM SCHIPPER, Associate Director
WILLIAM WILSON, Associate Director
NASDSE, INC.

Use of the Guide

This Planning Guide has been developed to help personnel in local education agencies review their existing special education programs and plan for the development of additional services leading to a comprehensive program of full services for all handicapped children. The guide consists of three major components:

I. A full services model program,

II. Statements reflecting the responsibilities for special education services,

III. Forms for assessing current programs and developing new program elements.

Designation of the Planning Team

It is suggested that the Planning Guide can be used most effectively by involving a multidisciplinary team consisting of administrators, supervisors, principals, teachers — both regular and special class — support personnel, and parents. Although the use of such a participatory planning process may be costly in terms of time and resources, it should return dividends in efficient planning for full services implementation.

Differences of opinion obviously will be found among members of the planning team, with varying views concerning what services should be delivered, the adequacy of existing program elements, personnel needed to deliver and supervise services, and priorities for the use of local resources to implement new program elements.

These differences of opinion are best resolved in the planning process. A full service plan that results from an interdisciplinary planning process has a much greater chance for funding and implementation than a plan prepared by program specialists without their general education and administration counterparts.

The first activity of the planning team should be to review in detail the model program presented in Part I of the Planning Guide, making any necessary revisions to adapt to state laws and regulations. The planning team should then develop statements of responsibility for all those involved in providing a full services program, using Part II as a guide. The final planning process will be to utilize the forms in Part III for a specific analysis of the existing program and planning for the development of additional program elements. Full details on use of each of these component parts of the Planning Guide are given at the beginning of each section.

When the Planning Guide is completed, it should provide a ready reference to the elements existing in the current program, those elements of a full service program that could be initiated readily with available resources and those that will require additional financing. As such, it should represent an accurate needs assessment for accomplishment of a full services program and an estimate of the additional resources necessary to achieve this goal.

SEQUENCE OF ACTIVITIES

PROGRAM MODEL

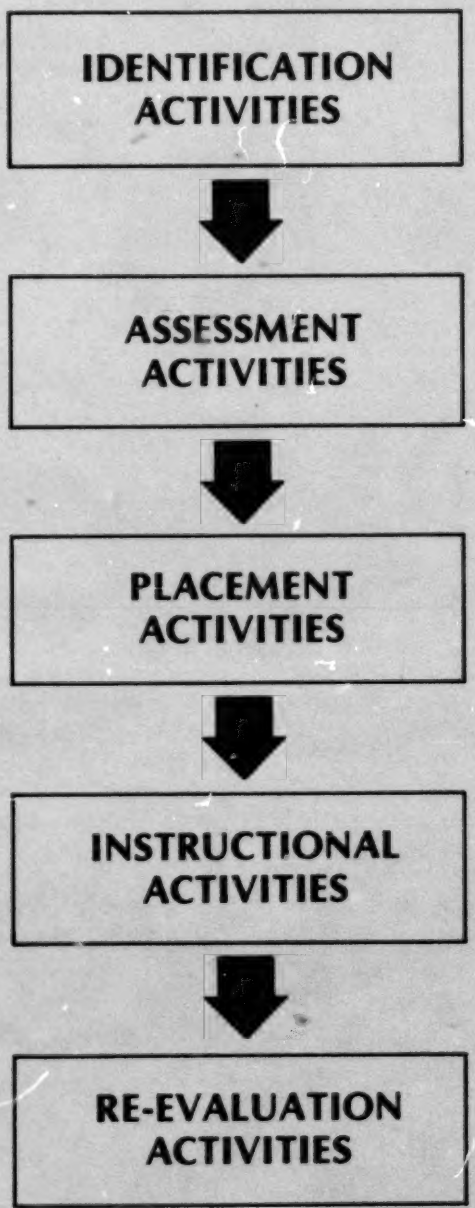

Figure 1

I. Full Services Model Program

Introduction

The planning team should, as its first step, review in detail the model program presented below and make any revisions necessary to assure that their revised model is in line with state laws and state Department of Education regulations. (For example, many state laws mandate full services prior to 1978 and specify age ranges that vary for those specified in P.L. 94-142.) Through the review and revision process, the planning team should develop a detailed program description of the full services program model it recommends for implementation.

In this phase of the planning process, it should be recognized that members of the planning team will tend to think of program elements based on the existing program and resources. The team should force itself to think in terms of "what should be" rather than "what is."

This program model was developed through a participatory planning process involving administrators, support personnel, teachers, and parents. The goal of the planning group was to develop a program model from the focal point of the individual student and his or her individual needs. The program was designed to include program elements necessary to meet the requirements of state and federal regulations. Specifically, the program was developed to be responsive to specific provisions of Public Law 94-142, and to provide the following assurances:

- extensive child identification procedures,
- "full service" goal and a detailed time table for attaining this goal,
- complete due process procedures,
- regular parent or guardian consultation,
- maintenance of programs and procedures for comprehensive personnel development,
- special education provided to all handicapped children in the "least restrictive environment,"
- non-discriminatory testing and evaluation,
- policies and procedures to protect the confidentiality of data and information,
- maintenance of an individualized program for all handicapped children,
- an effective policy guaranteeing the right to a free, appropriate public education at no cost to parents or guardians.

Program activities include: Identification, Assessment, Placement, Instruction and Reevaluation. Figure 1 presents the sequence of these activities.

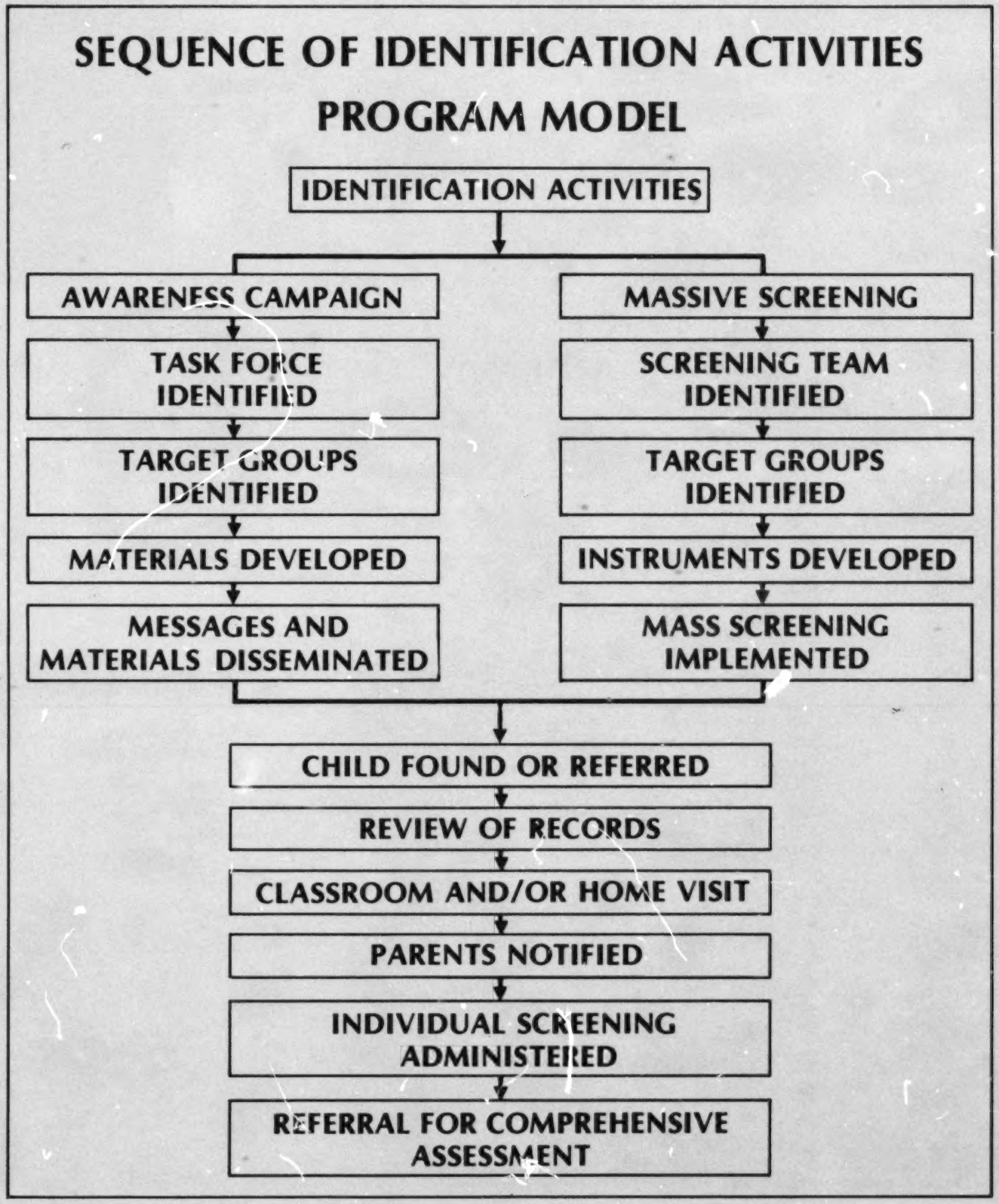
SEQUENCE OF IDENTIFICATION ACTIVITIES
PROGRAM MODEL
IDENTIFICATION ACTIVITIES
AWARENESS CAMPAIGN
TASK FORCE IDENTIFIED
TARGET GROUPS IDENTIFIED
MATERIALS DEVELOPED
MESSAGES AND MATERIALS DISSEMINATED
MASSIVE SCREENING
SCREENING TEAM IDENTIFIED
TARGET GROUPS IDENTIFIED
INSTRUMENTS DEVELOPED
MASS SCREENING IMPLEMENTED
CHILD FOUND OR REFERRED
REVIEW OF RECORDS
CLASSROOM AND/OR HOME VISIT
PARENTS NOTIFIED
INDIVIDUAL SCREENING ADMINISTERED
REFERRAL FOR COMPREHENSIVE ASSESSMENT

Figure 2

Identification Process

Definition: Identification is the ongoing process of locating and screening suspected exceptional children for special education services. The sequence of activities in the Identification Process is reflected in Figure 2.

Purpose: The purpose of the Identification process is to seek out, locate and identify those exceptional children within the jurisdiction of the division between the ages of 3 and 21, who are either not receiving an education or who are receiving inadequate educational services.

Policy: It is the policy of the Local Education Agency to assure that all children between the ages of 3 and 21 residing within the jurisdiction of the LEA who are exceptional, will be identified, located, screened, and referred for appropriate special education services. It is also the policy of the LEA that in doing so, there will be assurances of the protection of confidentiality and the rights of parents and children.

Awareness

A Local Education Agency awareness campaign will be organized and implemented to generate referrals for screening and to inform and educate community members concerning the right to a free and appropriate education for all children.

1. The campaign will be conducted in a systematic manner to emphasize:
   a. the nature of normal child development,
   b. the nature of exceptional developmental patterns,
   c. early signs of exceptional developmental patterns,
   d. the need for early intervention,
   e. the scope of special educational and related services available, and the persons to contact regarding these services,
   f. the right to a free and appropriate education.
2. The activities of the campaign will be planned to involve parents and community members to the fullest extent possible.
3. Those specific target groups to be contacted directly by the most appropriate means will include, but not be limited to:
   a. members of the educational community, specifically: administrators, supervisors, principals, assistant principals, guidance counselors, psychologists, *all* teachers, aides, secretaries, local private day school and day care center staffs, residential school staffs, college and university staffs;
   b. parents of children with potential educational handicapping conditions;
   c. members of the medical community, specifically: pediatricians, obstetricians, ophthalmologists, orthopedists, optometrists, dentists, neurologists, general practitioners, otolaryngologists, psychiatrists and other specialists;
   d. persons in professional capacities in hospitals and clinics and private practice;
   e. personnel in public agencies such as: public health, welfare, mental health, unemployment, vocational rehabilitation, counseling centers;
   f. members of service groups, including: Lions, Elks, Welcome Wagons, American Association for University Women, Boys Clubs, Girls Clubs, Easter Seals, United Cerebral Palsy, and Mental Health Association;
   g. parent organizations such as: Association for Retarded Citizens, Association for Children with Learning Disabilities, Parent/Teacher Associations, Programs for Enrichment of the Gifted;
   h. church members and groups,
   i. legislators and political groups;
   j. cultural (national) groups or clubs,
   k. professional organizations.
4. The public information and awareness campaign will utilize a variety of materials and media to communicate effectively with a diverse and scattered population. For example, the campaign will:
   a. place ongoing advertisements, news releases, and feature articles in newpapers and agency newsletters;
   b. schedule monthly advertisements, news releases, spot announcements, and interviews in statewide public broadcasting systems, radio and television;
   c. create, design, and place posters, bulletins, and brochures in appropriate locations;
   d. distribute referral postcards in: doctors' offices, school mailings, bank statements, payroll check mailings, utility bills, church bulletins, welfare checks, community stores, and libraries;

e. distribute an updated booklet describing school and community resources;
f. provide community groups with personal contacts via speakers, forums, educational training, and interviews with school personnel;
g. provide an open telephone line which will respond to those desiring information and/or assistance.

Screening

A system will be established for screening suspected exceptional children to determine the need for referral to assessment. Acceptable conditions will be indicated for the waiver of screening tests, such as: (1) the parents have already arranged for equivalent assessment results to be submitted to the school, (2) the equivalent assessment data have been obtained within the six months prior to identifying the child and have been made available to the school, or (3) the parents waive screening in preference to an independent evaluation. Procedures to follow when the decision is reached not to screen a child who has been referred will be determined.

1. The procedures for handling incoming referrals for screening shall consist of:
   a. completion of a standard registration form;
   b. check of all records to determine possible need for services. Records to be checked include the following:
      1) diagnostic centers
      2) speech, language, and hearing centers
      3) social service agencies
      4) health service agencies
      5) mental health centers
      6) vocational rehabilitation centers
      7) child development centers
      8) juvenile services or centers
      9) day care centers
      10) group homes
      11) adoption/foster care agencies
      12) private and charitable "care" groups
      13) school records;
   c. exploration of reasons for the educational problem;
   d. securing written parental permission for individual screening by:
      1) notifying the parents in the language of the home through the use of registered mail and/or telephone call or personal contact;
      2) stating the reasons for the screening request, when someone other than the parent has requested such action;
      3) indicating the persons who will institute the process;
      4) explaining the procedures to be used;
      5) explaining the rights of due process and access to school records;
      6) explaining how findings will be used and who will use them;
      7) assuring the parents of their full involvement in the results of the screening.
2. There will be two basic types of screening in the effort to identify all exceptional children:
   a. The process for massive aggressive screening of all kindergarteners, first graders, and preschoolers in day care centers and other public facilities will include specific measures or instruments which:
      1) check vision, hearing, speech and language, motor development, conceptual and perceptual development, and psycho/social development;
      2) use both observational and performance techniques;
      3) use techniques guaranteeing nondiscrimination;
      4) use a process of analysis by a team of specialists who will refer the student for a complete diagnostic evaluation when necessary.
   b. The process for screening specific individuals referred through the awareness campaign, such as those who are referred by teachers, parents or surrogates, self-referred, and all drop-outs and mid-year and year-end failures, will consist of:
      1) a record check and provision for automatic referrals for screening;
      2) subsequent biennial record check resulting in subsequent automatic referrals for screening;
      3) follow-through with a screening technique as described for massive screening,
      4) an interim placement during the screening and diagnostic process, when necessary.

3. The process for screening all students transferring into the school division will consist of:
   a. review of their records, when available, for handicapping conditions or need for special services;
   b. (if records are not available) either
      1) contact with the last school division attended for access to records, *or*
      2) contact with the home;
   c. (if needs for special education are indicated) a screening or diagnostic technique as well as the standard referral process.

Similar methods for screening will apply to all students referred by teacher, parents, or other persons outside the school division by following the standard referral procedures.

Recommending Diagnostic Evaluation

The process of recommendation for diagnostic evaluation and possible consequent additional service will include:

1. Completion of a standard registration form,
2. Contact with student and parent(s) regarding the need and procedure for the diagnostic evaluation,
3. Inclusion of all relevant screening data as part of student cumulative folder.

Evaluation of the Identification Process

A provision will be made for the evaluation of the effectiveness of the identification, screening, and referral components.

1. The necessary procedures and forms will be created to evaluate:
   a. success of the awareness campaign,
   b. completeness of the screening procedure or technique,
   c. operational value of the referral process, and
   d. the effectiveness of the total identification process.
2. The analysis of such an evaluation will result in:
   a. modification or revision of any component in the identification process,
   b. creation of alternative procedures or components,
   c. dissemination of results and changes to all persons who participate and agencies involved.

SEQUENCE OF ASSESSMENT ACTIVITIES

PROGRAM MODEL

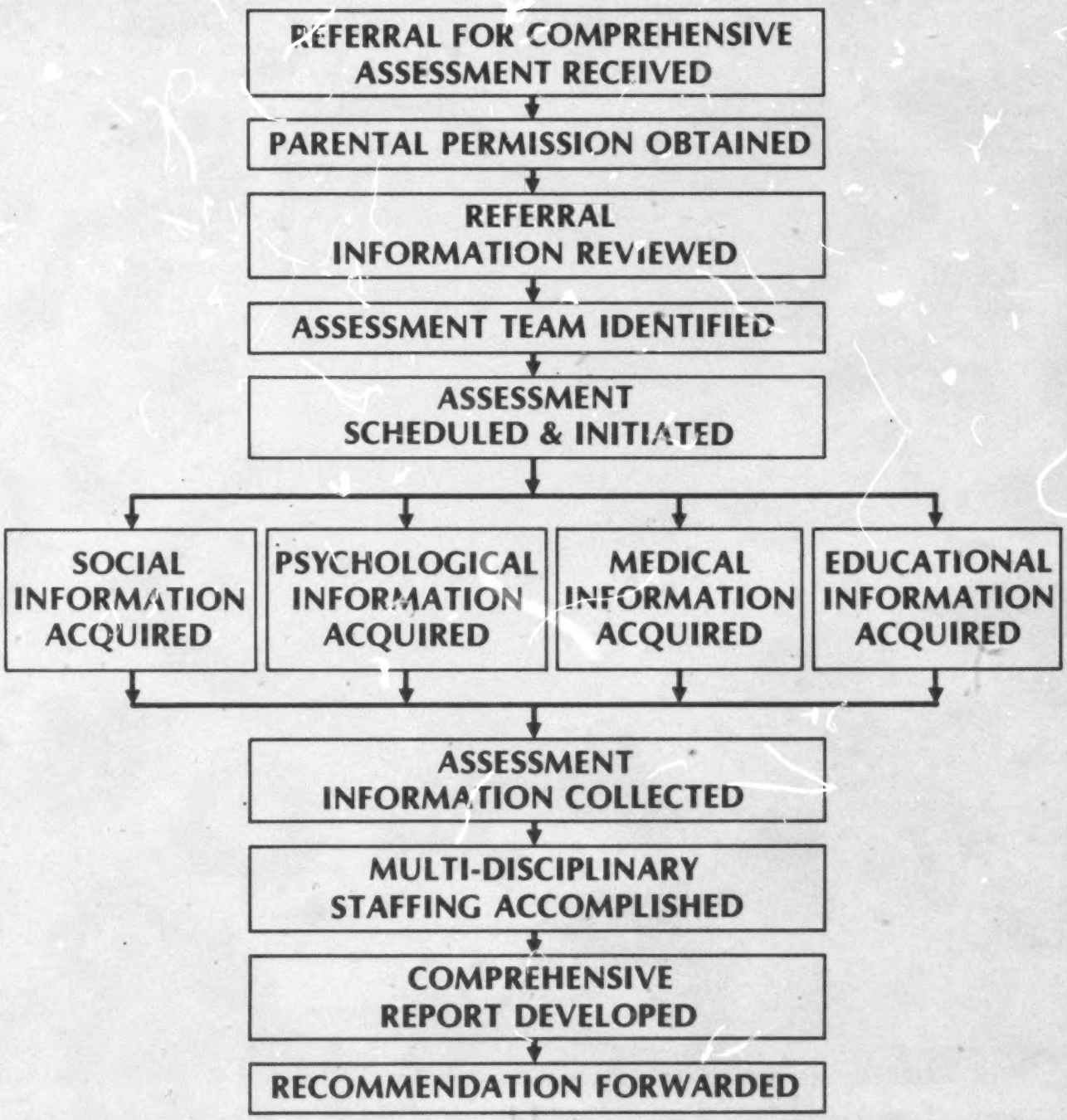

Figure 3

Assessment Process

Definition: Assessment is the process of determining student characteristics and functioning of an educational, sociological, physiological, and psychological nature. The sequence of activities in the assessment process is presented in Figure 3.

Purpose: The purpose of assessment is to identify and describe in a written report the child's educational, social, emotional, and physical strengths and weaknesses and to recommend strategies to meet the child's needs.

Policy: All students identified, referred, screened, and found to be in need of assessment will receive a multidisciplinary diagnostic evaluation and a comprehensive staffing to determine their individual needs for specialized programs. In the evaluation process:

- a child will receive tests appropriate to the degree and type of the presenting problem;
- the tests administered will be as free of discrimination as possible considering the population upon which they were standardized and the population to which they are administered;
- the tests will be administered in the child's primary language;
- the tests will be administered by personnel qualified to do so,
- the examiners will be trained to interpret the elements in each test which would be discriminatory against certain populations.

Diagnostic Evaluation

A procedure will be developed, implemented, and evaluated to provide a continuous process for the formal diagnostic evaluation of children who may need special educational services. Such a procedure will encompass a diagnostic delivery system to assure that each child identified, referred, and screened for an educationally handicapping condition will receive a multidisciplinary diagnostic evaluation to describe both strengths and weaknesses.

1. A complete history for each child will be obtained. Such a history will include information from the child, parents, and school personnel, as well as any public or private agencies to whom the child is known. The history will be gathered in the family's primary language with assurances given that such information remains confidential. Only the child, parents, appropriate school personnel, and authorized agency personnel will have access to the information.

   The history will relate to
   a. a statement of the presenting problem, and
   b. both individual and family data pertaining to medical, developmental, social, and psychological data, as well as educational and cumulative records.

   A description of family and sibling relationships and the environmental factors and circumstances will also be noted. When available and appropriate, information from other agencies will be included.
2. Both informal and formal observations of the child will be made for a designated period of time. Such observations will be made in both group and individual settings, including the home, school, and community.
3. Any testing procedure will assure in advance that:
   a. the diagnostic procedure will be explained to the parents in both oral and written form in their primary language;
   b. the parents will provide written permission for a diagnostic evaluation before any individual testing takes place;
   c. the parental communication will take place with a surrogate parent/guardian, if parents are unavailable;
   d. each step of the process will have a definite time line for completion;
   e. transportation necessary to secure testing will be made available;
   f. parents will be notified of the diagnostic findings and will be involved before final decisions are made regarding services to be received by the child;
   g. the child may be involved in the decision-making process when appropriate;
   h. the assessment information will be confidential and released only to the parents and the child when appropriate, authorized educational personnel, and other agencies when written parental permission has been obtained;
   i. the parents will have the right and option to seek a third party, independent evaluation,
   j. a procedure is developed to be followed when parental permission is denied.
4. The diagnostic evaluation will encompass the administration of appropriate tests based on

the information gathered during the screening, history gathering, and observations. These tests may include, but not be limited to:

a. a general physical examination if there has not been such an examination within the previous six months;
b. referral for examination by specialists when the general physical examination indicates such a need;
c. opthalmological examination;
d. audiological examination;
e. administration of educational tests to determine strengths and weaknesses, and learning style including:
    1) sensory and gross motor testing to determine perceptual motor development and sensory integration,
    2) psycholinguistic tests to measure the level of development in the various language functions,
    3) developmental assessment to determine the sequence and achievement of maturational levels as appropriate,
    4) speech: articulation, fluency, and voice,
    5) achievement tests to determine current level of academic performance,
    6) vocational interest and ability inventories to determine career potential and interest.
f. testing of mental abilities where it would be a valuable addition to the child's profile of strengths and weaknesses,
g. psychological and psychiatric testing when need is indicated by clinical observation or by type and severity of handicap.

Comprehensive Staffing

Multi-disciplinary staffing will be used to analyze and interpret all diagnostic material and to develop a comprehensive written report for educational placement and instructional services for the placement committee.

1. Accumulated data to be analyzed for inclusion in the report will include:
    a. a statement of the referral problem,
    b. a review of the diagnostic evaluation findings,
    c. reports from the parent(s), child, and significant others having previous contact with the child,
    d. an evaluation of the child's current academic progress, including a statement of the child's learning style, and sources of reinforcement and reward.
2. The written report will reflect recommendations for educational placement and instructional services.
3. The report will be communicated and interpreted to parent(s) of the child, utilizing, when necessary, the person who administered the individual tests.
4. The report will be forwarded to the placement committee.

The Placement Process

Definition: Placement is the process of determining for each child the educational setting within which his/her individual needs can best be met under the least restrictive conditions. The sequence of activities in the Placement Process is presented in Figure 4.

Purpose: The purpose of placement is to assure that the complete resources of the local education agency are organized to address each individual child's needs.

Policy: Through published school policy, each child will be assured that, to the maximum extent appropriate, exceptional children are educated with children who are not handicapped, and that special classes, separate schooling, or other placements apart from the regular educational environment occur only when education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Determination of Need for Specialized Services

Each child's need for specialized services will be determined from the educational staffing report. A child's eligibility for placement in the program of special education will be made in accordance with the criteria for eligibility as specified in the State Board of Education's administrative regulations, which define the conditions under which exceptional, gifted, and talented children can be included in special education programs.

Children determined to be eligible for special

SEQUENCE OF PLACEMENT ACTIVITIES PROGRAM MODEL

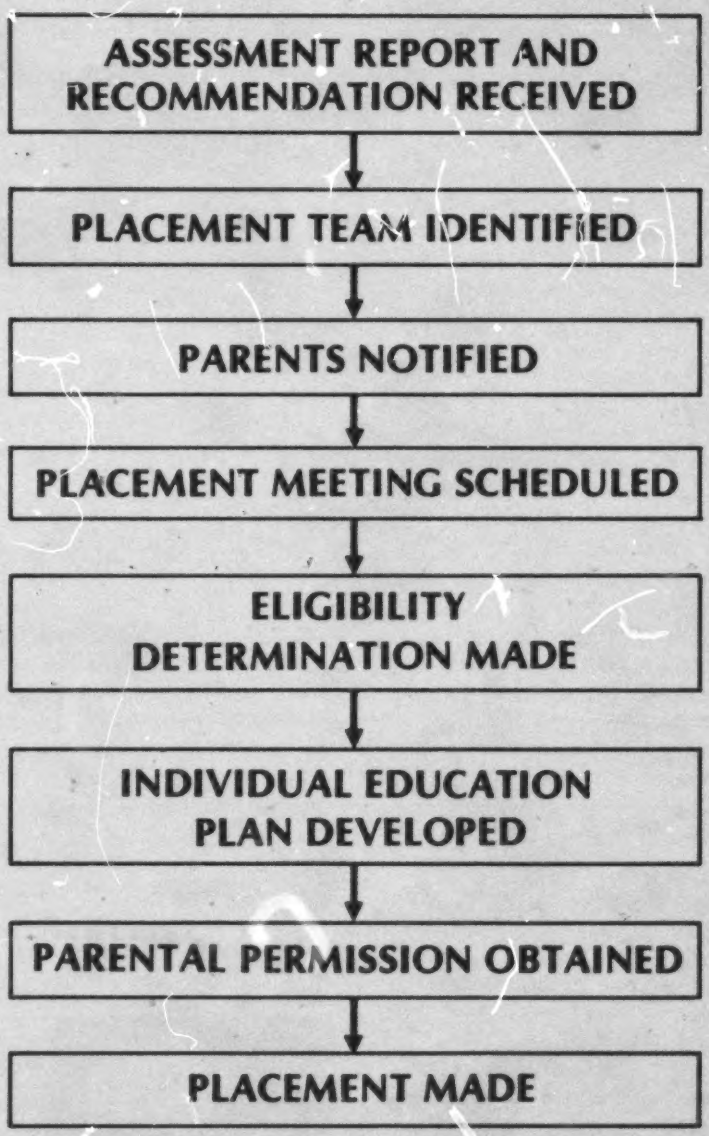

Figure 4

education services will be recommended for an individualized program as specified below. Children not determined eligible for the special education program will be recommended for the most appropriate educational placement within the school division outside of the program of special education. Parents will participate in the development and will approve a written plan describing the educational placement for the student. A due process procedure will be designed and published for the resolution or disapproval or modification of the plan by the parents, guardian, or student.

Individual Education Plan: [IEP]

An individualized plan for instructional and support services will be designed for each child determined eligible for special education services. Through each child's IEP, the complete resources of the school division will be available to bear directly on specific strengths and needs as reflected in his/her diagnostic profile and report. Each child's IEP will include the following:

1. A statement of educational strengths and measurable constraints;
2. A description of the program model the child will follow in his/her daily and weekly schedule;
3. A description of the nature and amount of support or auxiliary services to be provided;
4. A statement of the support services or training which will be provided directly to the regular classroom teacher, the special class teacher, the homebound instructor, or the residential staff, and the methods or personnel to be used to provide such services;
5. A statement describing any service(s) which should be provided to the child's parents;
6. A statement of the approximate time to be spent in each component of the child's program model, including dates for beginning each service and anticipated duration of such services for the child;
7. A statement of annual goals or objectives for each child based upon the reason for the particular placement recommended;
8. Designation of the person with primary responsibility for coordinating, implementing, and evaluating the child's plan;
9. A scheduled date for reevaluation and modification of the child's individual plan;
10. A schedule of meetings with parent(s) or guardians and student, when appropriate, to review pupil progress.

Placement Alternatives

The LEA will support and maintain a variety of placement alternatives which will allow maximum flexibility in the design of each child's IEP. Placement alternatives will include:

1. A child placed in a regular classroom who receives supportive and auxiliary services appropriate to his/her needs. These services may be provided through:
   a. an itinerant or resource teacher who assists the regular classroom teacher,
   b. an itinerant or resource teacher who works directly with the child on certain programs,
   c. part-time placement in a resource room for specialized instruction,
   d. any combination of these services;
2. A child placed in a special education classroom and integrated with non-special education students for certain programs or activities;
3. A child placed in a self-contained special education classroom for all or a major portion of each day;
4. A child placed in a self-contained classroom in a special school serving only handicapped children, where the availability and proximity of support services warrant such a placement;
5. A child placed in a private or public day school program that provides instructional and/or treatment services not available in the school division;
6. A child placed in a 24-hour residential program that provides treatment, care, and instructional programs if these intensive services are needed;
7. A child receiving instruction for a specified time in the home or the hospital. The parents of the homebound or hospitalized child may also receive training in methods of care and instruction for the child;
8. A child placed in a diagnostic classroom for a period of time specified by the Placement Committee. This placement may also serve transfer or re-entry students, formerly specified as requiring special education services. All placements in a diagnostic classroom will be temporary, and an ongoing evaluation will be conducted,
9. Services for preschool children, as follows:
   a. The child and his parents may be seen on a regular basis by a special education

teacher in a regular school;

b. The child and his parents may be seen on a regular basis by a special education teacher in the child's home;

c. The child may attend public or private program outside the public school. This program should include services available for parents.

Placement Resources and Services

In order to provide a comprehensive instructional program tailored to the unique needs of each exceptional child, the LEA may provide the following services by qualified personnel:

1. Special education instructional services for ages 2-21,
2. Nursing services to include nutrition and hygiene,
3. Instructional support services for the visually impaired,
4. Occupational therapy,
5. Physical therapy,
6. Speech and language therapy,
7. Dagnostic/educational audiology and rehabilitation,
8. Social work services,
9. Psychological services,
10. Adaptive physical education,
11. Adaptive instruction in specific academic subjects,
12. Music therapy,
13. Vocational and career counseling,
14. Counseling and guidance services,
15. Career development services.

SEQUENCE OF INSTRUCTIONAL ACTIVITIES PROGRAM MODEL

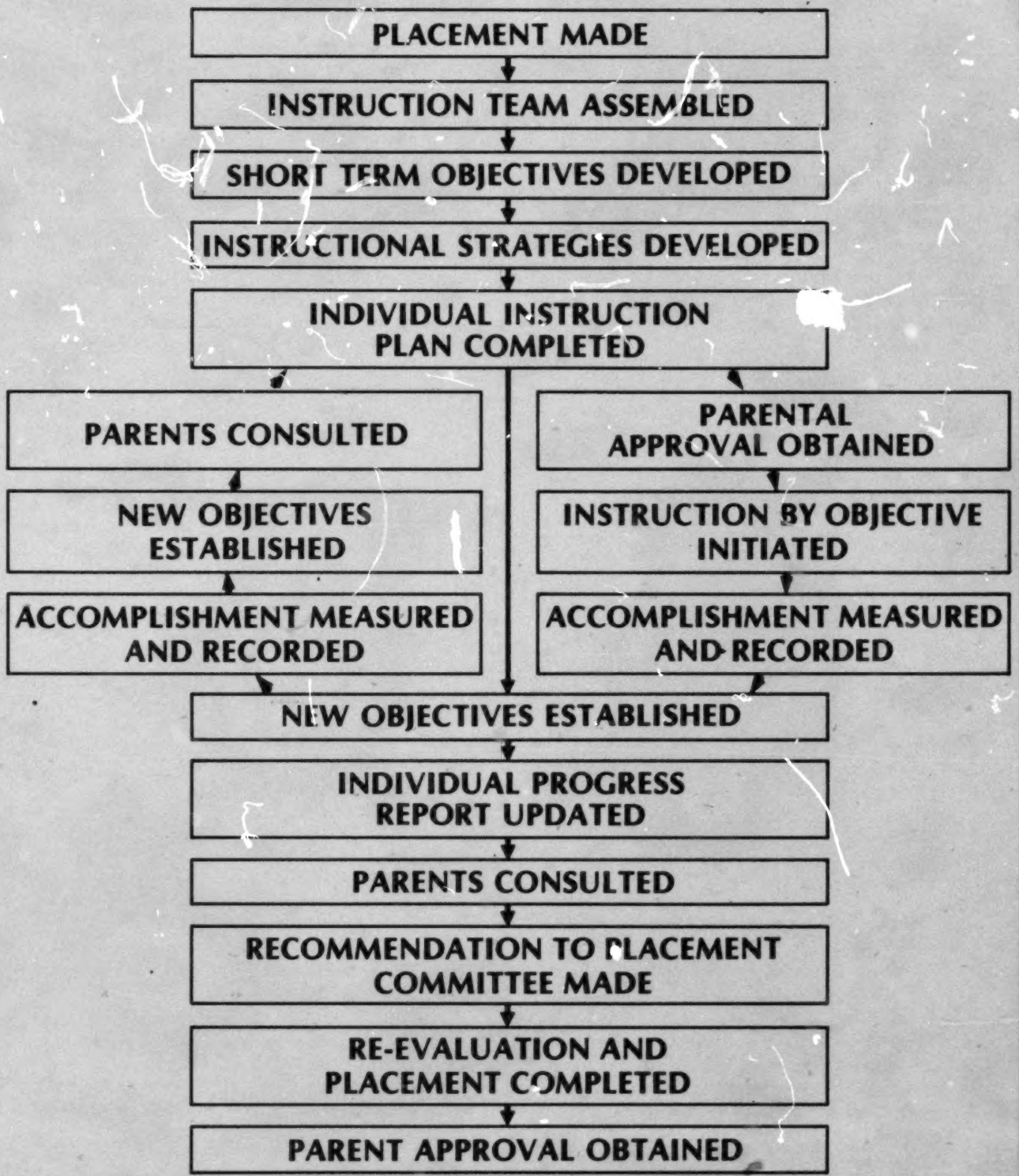

Figure 5

Instructional Process

Definition: Instruction is the process of designing and conducting activities to assist students enrolled in the special education program in achieving a series of developmental and sequential short-term objectives. The process leads directly toward the attainment of stated annual goals. The sequence of activities in the Instructional Process is presented in Figure 5.

Purpose: The purpose of instruction is to provide each child enrolled in the special education program with the opportunity for optimum growth through a planned sequence of activities and experiences. The instruction is coordinated so that the total resources of the LEA are utilized as needed to assist each child in achieving individual objectives.

Policy: It is the policy of the LEA that, for every child enrolled in the special education program, an individual instruction plan will be developed to coordinate the activities of all personnel involved in the instructional program of each child. It is also the policy of the LEA that each child's progress toward achieving stated objectives in the individual instruction plan shall be measured and accumulated into an individual progress report which will be reviewed at least annually with the child's parents.

These policies pertain to all children either receiving direct services within the LEA or receiving educational services outside the school in a placement designated by LEA personnel.

Individual Instruction Plan

1. Development of Short Term Plan
   a. *Timing* — Within a period of six weeks following placement, an individual instruction plan will be developed for each child in the special program;
   b. *Personnel involved* — All personnel with direct responsibility for providing instructional and/or related services, the parent, and the child will be involved in the development of the child's individual instructional plan and in the establishment of specific measurable objectives to be achieved in each area or segment of the child's program.
2. Content of Plan: The individual instruction plan will:
   a. incorporate the findings and recommendations from the child's individual education plan; (See page 00);
   b. provide for revision of annual goals or the establishment of new or additional long-range goals which may be made during or after the six-week initial placement period;
   c. specify short-term measurable objectives to be reached by the child in each area of instruction or related service. These short-term objectives will be developmental and sequential, leading to the achievement of the annual goals specified in the IEP. Each objective will include a statement of when, how, and by whom the objective is to be measured. Objectives will be established for each child in the cognitive, affective, and psychomotor domains;
   d. specify procedures, media, and materials to be used in the instructional process leading toward the achievement of each objective;
   e. specify the procedure through which each child's progress will be periodically reviewed by all personnel involved in his/her instructional program and new short-term objectives established.

Individual Progress Report

An individual progress report will be maintained for each child in the special education program. This individual progress report will:

1. reflect the child's progress toward the achievement of each behavioral objective established in his/her instructional plan;
2. reflect progress toward the achievement of established long-range goals;
3. report instructional procedures, methods, and materials found to be effective in the achievement of specific objectives;
4. reflect instructional settings (i.e., small group, individual) found to be effective in the achievement of specific objectives;
5. report the timing and sequence of the establishment of additional short-term objectives as the school year progresses;
6. serve as the basis for reporting each child's progress to his/her parent(s).

Reevaluation of Placement

Each child's placement will be reevaluated on *at least an annual basis* to assure that the child is succeeding and to determine if a more appropriate placement is needed. More frequent evaluation may be requested by the child or any other person who has reason to believe a reevaluation is pertinent.

The annual review of each child's placement will take into account all information gathered from the measurement of the effectiveness of the long- and short-term behavioral objectives established in the child's individualized instructional plan.

Timing of Program Model

The sequence and timing of events in the program model are included as Figure 6, showing the weeks over a year span for each event in the planning activities.

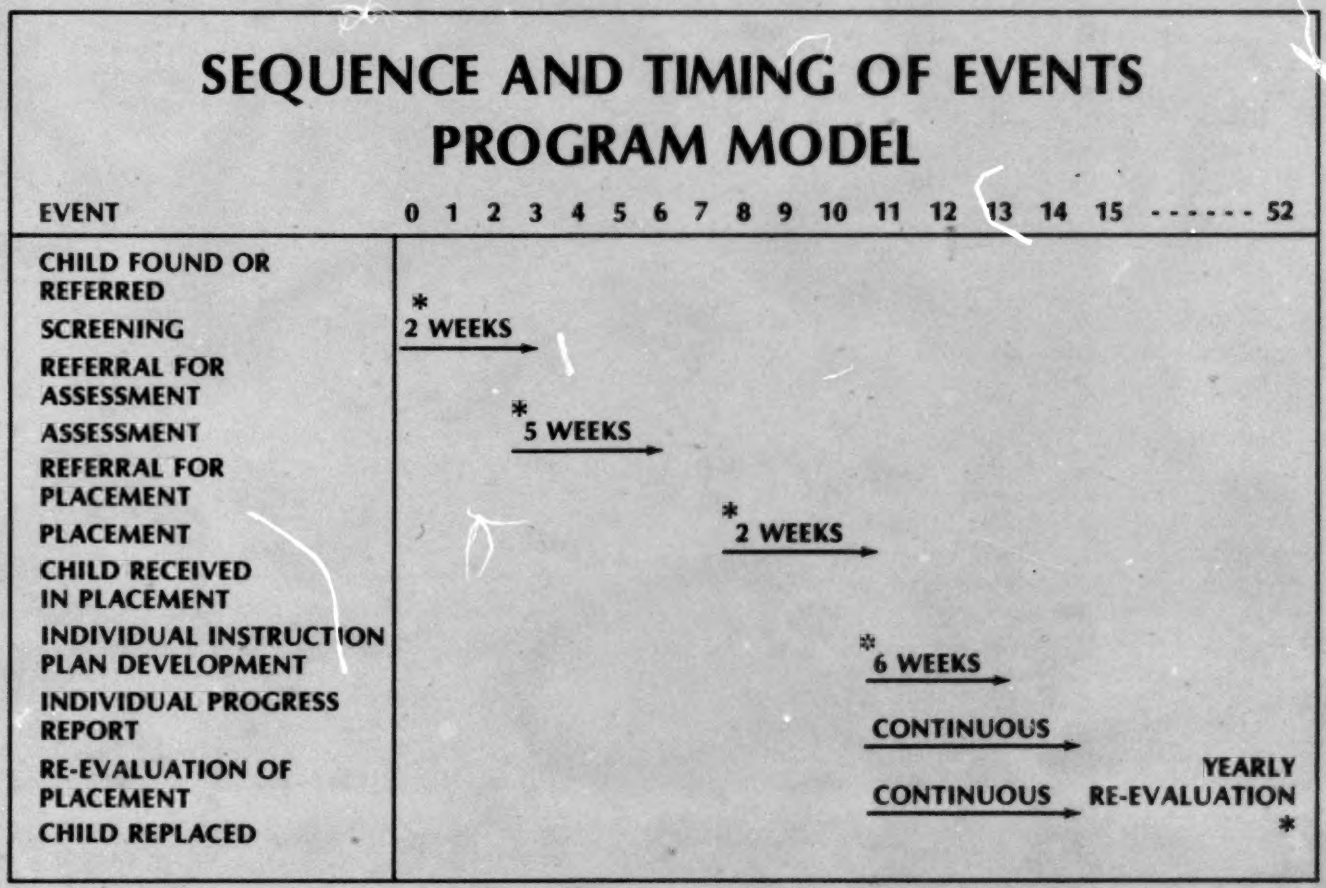

Figure 6

II. Responsibilities for Special Education

The statements of responsibility presented here have been written to be consistent with the administrative philosophy that the building principal is the educational leader of the school and is responsible for all programs within that school. The planning team should review these statements of responsibility and develop statements that are consistent with the administrative policy of their own local school system.

The goal of this activity is to develop a set of statements that can be agreed upon by administrators and program specialists and that will serve to delineate clearly the basic responsibilities involved in providing a full services program.

State Department of Education

The Department of Education is the state agency with primary responsibility for insuring that educational services are provided to all handicapped children from the age of 3 to 21, thereby fulfilling the state's mandate of providing free, appropriate, public education for handicapped children. In this process, it is intended that local education agencies (LEAs), other state agencies, institutions, and private organizations be utilized to provide the required educational services so that all handicapped children are receiving all necessary educational services by the 1976-77 school year. In meeting the above stated goals, handicapped children are to be educated in the least restrictive setting appropriate to their individual needs.

To accomplish the objective of serving all handicapped children, it is the responsibility of the Department to:

- Determine eligibility criteria for those to receive special education services,
- Provide or cause to be provided all necessary special education services,
- Establish regulations and guidelines pertaining to the education of handicapped children,
- Establish implementation guidelines and facility specifications for special education services,
- Establish certification requirements for personnel providing services to handicapped children,
- Provide assistance to LEAs in implementing and operating educational programs for handicapped children,
- Review and approve implementation and operation of education programs for handicapped children to ensure conformance to established standards and guidelines,
- Receive, disburse, and administer state and federal funds designated for education of handicapped children,
- Establish guidelines to protect student and parent rights, particularly in the areas of due process and confidentiality of information.

Division of Special Education

The Division of Special Education has the leadership role in expanding and developing educational programs for handicapped children in the state. It provides guidance in the implementation of State Board of Education regulations and policies governing the education of handicapped children and provides direction and assistance for special education in the State.

It is the responsibility of the Division of Special Education to:

- Serve as the advocate for special education in the Department of Education and state government,
- Work closely with and provide staff support to the State Advisory Panel for Special Education,
- Inform LEAs, parents, and other agencies of the content and implications of state and federal laws pertaining to the education of handicapped children,
- Perform statewide planning for educational programs and services for handicapped children,
- Update the State Plan for Special Education annually,
- Develop the necessary procedures, guidelines, forms, and instruments to implement State Board of Education policies, and state and federal laws governing the education of handi-

capped children,
- Monitor implementation of special education programs,
- Monitor special education programs to assure compliance with state regulations,
- Review LEA special education plans and recommend action on them to the Department of Education,
- Aprove LEA requests for state reimbursement for expenditures for special education services,
- Administer Education for the Handicapped Act funds and monitor programs funded from these monies,
- Review proposals for projects involving handicapped students made to other Elementary and Secondary Education Act programs,
- Provide and participate in inservice training for educational personnel,
- Maintain summary information on special education in the state,
- Disseminate information concerning educational programs for the handicapped to interested agencies, organizations, and individuals,
- Participate in accreditation and reevaluation studies of LEAs,
- Review and recommend action on certification requests of special education teachers and other specialized personnel providing services to handicapped children,
- Serve as liaison with other state agencies, parent and professional organizations, and other private agencies serving handicapped children,
- Serve as liaison with colleges and universities preparing personnel to work with handicapped children,
- Serve as liaison with federal projects and national agencies which provide services for handicapped children.

Local Education Agencies

The local LEAs have the primary responsibility for providing appropriate educational programs for all handicapped children between the ages of 3 and 21 who are legal residents of the local district. The basic responsibility for handicapped children is to ensure that all such children receive a free and appropriate education.

The LEA's responsibility for a handicapped child is not lessened if the child is being served by another public agency, institution, or private organization. The LEA has the final responsibility to insure that the needed services are provided, either by providing the service directly or obtaining the service from another source. The organizational arrangements under which handicapped children are served, the agencies providing services, and the types of services provided are determined locally to meet individual situations; such determinations are to be within state guidelines.

To ensure the education of all handicapped children, the LEAs have the responsibility to:

- Seek out and locate all children within the LEA with possible handicapping conditions, including those served by other public and private agencies,
- Provide for the comprehensive evaluation of educational needs, the development of individualized educational plans, and the provision of appropriate educational services for every handicapped child in the LEA,
- Operate educational programs to serve handicapped children in accordance with policies, procedures, and guidelines established by the State Department of Education,
- Coordinate services for handicapped students in the LEA provided by the schools, other public and private agencies, and individuals,
- Contract with other LEAs, public and private agencies, and individuals to provide appraisal, instructional, and support services to handicapped children,
- Extend, at a minimum, equal effort on behalf of the education of each handicapped child as expended for the education of each nonhandicapped child,
- Develop and approve the special education plan and budget and submit the plan, after approval by the local school board, to the State Department of Education,
- Provide a special education inservice training program for LEA personnel to maintain and improve their skills and abilities in serving handicapped children,
- Provide for due process for handicapped children and their parents in accordance with procedures established by the State Department of Education,
- Maintain information records of all handicapped students in such a manner as to protect confidentiality of information and to allow parental access to information,
- Maintain information records of all handicapped students in such a manner as to protect confidentiality of information and to allow parental access to information,
- Provide such reports concerning the education of handicapped children as required by the

State Department of Education,

- Maintain information on state and local educational programs for the handicapped, parent organizations, and other services for the handicapped and provide such information to parents of handicapped children,
- Provide for a multi-sourced diagnostic evaluation and a comprehensive staffing of all handicapped students receiving special education services. All tests administered will be as free of discrimination as possible, considering the population upon which they were standardized and the population to which they are administered.

School Principal

The school principal has the primary responsibility for providing educational programs to handicapped children. The primary role of the principal in this area is to ensure the effective and complete provision of necessary and appropriate services to handicapped children in the school. Specific responsibilities are to:

- Coordinate and administer special education services in the school,
- Supervise educational personnel serving handicapped children in the school,
- Designate and implement educational programs for handicapped children in the school, in accordance with approved policies, procedures, and guidelines of the LEA and of the State Department of Education.
- Promote attitudes of school personnel and parents that encourage the acceptance and inclusion of handicapped children in regular classes and interaction with regular students,
- Receive referrals of students with suspected handicapping conditions from teachers, parents, and others,
- Arrange for appropriate evaluation for those students recommended for evaluation as a result of a screening procedure,
- Supervise the maintenance of child records at the school level and protect the confidentiality of these records,
- Receive teacher requests for assistance and provide or arrange for specialized assistance,
- Implement due process procedures,
- Plan for special education programs in the school and make budget recommendations to the superintendent,
- Participate in LEA plan for special education services.

Teachers Serving Handicapped Children

Teachers who serve handicapped children are teachers of special classes, resource teachers, itinerant teachers, homebound and hospital teachers, child development specialists, and other teachers with handicapped children in their classrooms. Specific responsibilities of these teachers are to:

- Participate in the referral and evaluation processes, as appropriate,
- Cooperate and participate in the development of individual student placement plans,
- Coordinate the development of individual instruction plan for each child, including developmental and sequential short-term objectives leading to the achievement of annual goals specified in the placement plan,
- Provide appropriate instruction to handicapped students,
- Request support and assistance from specialized resource personnel as necessary to meet the needs of handicapped children,
- Provide consultation assistance to other educational personnel, as appropriate,
- Monitor student progress and update individual instructional plan,
- Maintain continuous progress report on student achievement of specified objectives,
- Participate in and conduct periodic reviews of student progress,
- Hold and attend regular parental conferences, and conduct home visits to students and their parents, as appropriate,
- Participate in annual placement meeting of handicapped students, providing Placement Committee with summary of student achievement in prior placement.

LEA Supervisor of Special Education

The Supervisor of Special Education has a leadership role in developing and expanding special education programs in the LEA. The supervisor provides guidance in the implementation of local and state Board of Education policies and regulations governing the education of handicapped children in the LEA. The supervisor's primary responsibility is to coordinate all technical assistance

or instructional support services in support of the instructional program for handicapped students within the LEA. The specific responsibilities are to:

- Serve as the advocate for special education in the LEA,
- Work closely with and provide staff support to the local Advisory Committee for Special Education,
- Inform LEA personnel, parents, and other agencies of the content and implications of state and federal laws and regulations pertaining to the education of handicapped children,
- Coordinate LEA planning for educational programs and services for handicapped children,
- Update the LEA plan for special education annually,
- Maintain summary data on special education in the LEA,
- Disseminate information concerning LEA educational programs for the handicapped to interested agencies, organizations, and individuals,
- Provide technical assistance to principals in the supervision of special education programs and personnel,
- Coordinate LEA awareness, screening, assessment, and placement programs,
- Initiate and administer programs to locate and evaluate students with suspected handicapping conditions,
- Monitor operation of LEA programs for handicapped children to assure operation in accordance with local and state approved policies, procedures, and guidelines,
- Provide consultative service, through principals, to teachers serving handicapped students,
- Maintain information on and liaison with other public and private agencies and individuals who provide services to handicapped students in and of the LEA,
- Coordinate the development of LEA inservice program for special education,
- Participate in total LEA inservice program for all personnel,
- Provide liaison with parent and professional organizations.

Appraisal and Support Personnel

These personnel provide additional services to handicapped children or children with suspected handicapping conditions. They include, but are not limited to, educational and psychological examiners, speech and language pathologists and audiologists, school counselors, school nurses, occupational, music and physical therapists, social workers, psychologists, and physicians.

Their work in connection with the implementation of individual goals in the instruction program falls under the supervision of the principal. Their work in connection with appraisal and placement functions falls under the appropriate supervisor of instructional support services. Specific duties vary with the position, but in general their responsibilities are to:

- Participate in the referral, evaluation, and placement processes, as appropriate,
- Assist in the development and implementation of individualized instructional plans for each handicapped student,
- Provide necessary supportive services for handicapped children,
- Provide consultative services to other educational personnel,
- Participate in periodic reviews of student programs.

III. Planning Forms

The following section of the Planning Guide consists of forms to be used in reviewing the existing program and planning for the development of additional program elements leading to a full services program. The forms consist of Program Element statements abstracted from the Model Program.

The first step in the final planning process is for the planning team to revise the program element statements to make them consistent with the team's revision of the model program. The resulting list of program elements should reflect those parts of the local program that the planning team will recommend for implementation.

In using the planning forms, the team should consider each program element independently. First, is this program element adequate as it is currently operating? The term "adequate" should be defined operationally as it is described in the model program. If the team decides that the first program element is adequate, it should be checked off and the next element considered.

If the program element is deemed not adequate at the present time, two possibilities should be considered. It may be possible that the program element can be implemented through administrative reassignment of existing personnel or financial resources. This may be achieved through the reordering of priorities within the instructional program. In assessing available financial resources, the planning team should consider flow-through federal funds connected with P.L. 94-142. If the program element can be developed and implemented in this fashion without additional financial resources, the second column should be checked.

But if, after review of existing resources, the determination is made that additional financial or other resources are needed to develop and implement the program element, the planning team should note in the third column the action and funds required.

Thus, when these forms have been completed, the Planning Guide represents an assessment of what program elements exist currently, what could be instituted with available resources, and what elements will need additional financing to achieve a full services program.

Special Education
Full Services Program Model
Planning Guide

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
A. Awareness System			
1. Policy assuring awareness system			
2. Personnel to administer awareness system			
3. Training program for personnel involved in awareness system			
4. Procedures for awareness system developed			
5. Awareness materials developed			
6. Personnel to conduct mass screening activities			
7. Mass screening instruments available			
8. Personnel to conduct classroom visits			
9. Personnel to conduct home visits			
10. Individual screening instruments available			
11. Personnel to conduct individual screening			
12. Personnel to prepare referrals for comprehensive assessment			
13. Parental permission forms for referral for individual screening available			
14. Parental permission forms for referral for comprehensive assessment available			

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
B. Assessment Activities			
1. Policy providing multi-sourced diagnostic evaluation and comprehensive staffing			
2. Policy assuring protection in child evaluation procedures			
3. Management system to coordinate assessment activities			
4. Trained personnel to coordinate and supervise comprehensive assessment activities			
5. School personnel to conduct assessment activities Psychological assessment Educational assessment Social history Specialized diagnostics Other			
6. Procedures available to secure non-school personnel for specialized diagnostic information as needed			
7. Appropriate diagnostic material available			
8. Procedures for multi-disciplinary staffing			
9. Procedures for comprehensive written report for all children evaluated			
10. Procedure for interpreting assessment findings and recommendations to parents			
11. Procedures for informing parents of procedural safeguards			

Special Education
Full Services Program Model
Planning Guide [continued]

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
12. Facilities for assessment sequence activities			
13. Provision of transportation for family to assessment site if necessary			
14. Inservice training program for personnel involved in assessment activities			
C. Placement Activities			
1. Management system to coordinate placement activities			
2. On-going training program for personnel involved in placement activities			
3. Procedures assuring least restrictive placement in accordance with individual education program			
4. Personnel to coordinate and supervise placement activities			
5. Personnel to staff placement activities			
6. Provisions for released time for personnel to participate in placement activities			
7. Individual education plan developed for every child served by special education program. Children served through placements outside of the division			
8. Facilities for placement activities			
9. Procedures for parental involvement in individual education program			

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
10. Procedures for parental approval of IEP			
11. Placement alternatives:			
a. Regular classroom with supportive services to teacher and/or child through itinerant or resource teacher			
b. Diagnostic classroom placement			
c. Regular classroom with part-time placement in resource room			
d. Special classroom allowing integration with non-handicapped students for certain programs and activities			
e. Self-contained special classroom for all or a major portion of day			
f. Special center or school			
g. Public day school program			
h. Private day school program			
i. Residential programs providing special education and related services			
j. Home and/or hospital instruction			
k. Home and center based preschool instruction for children and parents			
12. A full range of supportive services available			

Special Education
Full Services Program Model
Planning Guide [continued]

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
13. Procedures to assure confidentiality of records			
14. Procedures to assure due process rights for children and parents available			
15. Due process procedures for LEA			
D. Instructional Activities			
1. Policy assuring individual education plan for all children served directly by LEA or through services outside of LEA			
2. Policy assuring individual education plan for all children served outside of LEA to fulfill intent of free, appropriate public education			
3. Program standards for each type of program alternative			
4. Management system to assure involvement of instructional and support personnel working with an individual child to participate in the development and implementation of the child's individual instruction plan			
5. Facilities to assure optimum instructional program			
6. Instructional materials to assure appropriate individualized instructional programs			
7. Procedure to assure periodic updating of individual instruction plan and setting of new objectives			
8. Procedures for annual review to assure appropriateness of IEP			

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
9. Staff supervision available			
10. Technical assistance available			
11. Facilities for support service personnel where they work with children			
12. Clerical help for support service personnel to assist in report preparation			
13. Clerical help for instructional personnel to assist in maintenance of individual education plans			
14. Procedures to assure participation of teachers in parent conference activities			
15. On-going inservice training program for all personnel involved in instructional activities with handicapped children			
E. Administration and Supervision			
1. Statements of responsibilities for special education program developed and published			
2. Personnel to supervise total program			
3. Advisory committee (including parents and handicapped individuals) appointed and operational			
4. Special education plan developed and published			

Special Education
Full Services Program Model
Planning Guide [continued]

Program Element	Adequate?	Can be developed without additional resources?	Action required for adequate development?
5. Program and procedures manual developed and published including: Special education policies Roles and responsibilities Awareness and screening activities Assessment activities Placement activities Instructional activities Due process procedures Confidentiality procedures Forms and usage instructions			
6. Inservice training program for all personnel (instructional and non-instructional) who deal with the handicapped			
7. Approval of local plan by local school board			
8. Approval of local plan by State Department of Education			

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